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Complete if Known Substitute for form1449A-PTO 09/782,721 **Application Number** February 12, 2001 Filing Date INFORMATION DISCLOSURE H. Michael Shepard First Named Inventor STATEMENT BY APPLICANT 1623 **4 4653--**Art Unit L. Crane **Examiner Name** (use as many sheets as necessary) **NB 2004.02**

Attorney Docket Number

U.S. PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Document Number Number – Kind Code ² (if kn	Publication Date own) MM-DD-YY	Name of Patentee or Application of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear			
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